



SONAWANE RAJENDRA DINKAR  
AT POST KOCHARGAON TAL DINDORI DIST NASHIK  
NASHIK  
MAHARASHTRA 422001  
Mobile No: 9604095237

Sub: Risk Assumption Letter

Dear Sir/Madam,

Thank you for choosing ICICI Lombard General Insurance Company Limited (ICICI Lombard) as your preferred service provider.

Please find enclosed Policy No. **3005/174622739/00/B00**, which has been issued based on the below mentioned details:

Insured & Vehicle Details	
Name of Insured	SONAWANE RAJENDRA DINKAR
Period of Insurance	Jul 01, 2019 to Jun 30, 2020
Vehicle Make / Model	HONDA MOTORCYCLE / SHINE
RTO City	MAHARASHTRA-NASHIK
Vehicle Registration No.	MH15EL2439
Vehicle Registration Date	Mar 31, 2014
Engine No.	JC36E73283677
Chassis No.	ME4JC36KBE73090487

The information provided above is based on the information received from you and accordingly, the policy has been processed. Coverage of risk is subject to realisation of the full premium, post which, insurance coverage under the policy would commence. In case the premium is not received by us due to cheque dishonour or any other reason, the insurance cover shall be void ab-initio.

We have issued the policy basis your confirmation that you hold a valid PUC and/or Fitness certificate, as applicable.

If you require any changes in the Certificate of Insurance cum Policy Schedule, you are requested to inform us by writing to customersupport@icicilombard.com or calling our 24 hour toll free helpline on 1800 2666. Absence of any communication within a period of 15 days of the date mentioned on this letter, would mean that the issued policy is in order and as per your proposal.

The information provided is merely illustrative and shall not be construed to be an evidence of existence of a contract of insurance. The Risk Assumption Letter is to be read in conjunction with the policy and shall be considered null and void without the same.

In case of a claim, immediately notify ICICI Lombard General Insurance Company Limited on the  
Toll Free Number **1800 2666** / (Chargeable) **8655 222666** or SMS **"CLAIM"** to **575758**

Mailing Address: 401 & 402, 4th Floor, Interface 11, New Linking Road, Malad (West), Mumbai - 400 064, IRDA Reg. No. 115, CIN: L67200MH2000PLC129408